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Attorney Docket No.		No.	MP0147.D1
First Inventor Era		Erai	n Rotem
Title	FLIP CH	IP WI	TH NOVEL POWER AND GROUND ARRANGEMENT

PATENT APPLICATION [First inventor Eran Rotem						
TRANSMITTAL		Title	FLIP CHIP WITH NOVEL POWER AND GROUND ARRANGEMENT							
(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))			Expre	Express Mail Label No. EV 092 055 921 US						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				1	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
1.					1 1 1 1 1 1 1 1	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:				
	or in an App Conti Prior app For CONTIN under Box 5	olication Data Sh nuation olication information IUATION or DIVIS b, is considered	neet under 37 CFR Divisional On: Examina SIONAL APPS only I a part of the disci	1.76: Continuation-in-per Huynh, Andy The entire disclosur	art (CIF	°) e prior app or division	of polication,	orior application No Group / Art Uni from which an oa ation and is here	it: 2818 ath or declaration is supplied by incorporated by reference	
				17. CORRESPO				in the oddinited a	pphoanon parts.	
	☑ Custon	ner Number or Ba		2 Insert Customer No. or	3624 Attach	bar code la	abel here)	•	orrespondence address below	
	Name	Marvell Semiconductor, Inc.								
_	Address	700 First Avenue Mail Stop 509								
	City	Sunnyvale		State	CA	CA Zip Code			94089	
	Country	United States		Telephone	408	2,0000			408-752-9034	
	Name (Pri	int/Type)	Michael D. Wig	gins	Registration No. (Attorney/Agent) 34,754					
Signature				<u> </u>						

Name (Print/Type)	Michael D. Wiggins	Registration No. (Attorney/Agent)	34,754
Signature	Mulal D Nemor	Date	January 27, 2004
	00		



PTO/SB/17 (01-03)

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CEE TO ANOMITTAL	Complete if Known				
FEE TRANSMITTAL	Application Number	To Be Assgined			
for FY 2004	Filing Date	Herewith			
	First Named Inventor	Rotem, Eran			
Patent fees are subject to annual revision.	Examiner Name	To Be Assigned			
Applicant claims small entity status. See 37 CFR 1.27	Group / Art Unit	To Be Assigned			
TOTAL AMOUNT OF PAYMENT (\$) 770	Attorney Docket No.	MP0147.D1			

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METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)						
☐ Check ☑ Credit card ☐ Money ☐ Other ☐ None				3. ADDITIONAL FEES  Large Entity   Small Entity						
Order  Deposit Account:				Large	EDULY	Sman	entity			
Deposit Account.				Fee	Fee	Fee	Fee	Fee Description	Fee Pald	
Deposit				Code 1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath		
Account 08-0750			1052	50	2052	25	Surcharge - late provisional filing fee	}		
Number				1002	30	2002	23	or cover sheet.		
Deposit				1053	130	1053	130	Non-English specification		
Account	Harness, Dickey & Pierce, I	P.L.C.		1812	2,520	1812	2,520	For filing a request for reexamination		
Name The Commissioner is authorized to: (check all that apply)					920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s)	indicated below 🛛 Credit	any overpayments		1805	1,840°	1805	1,840*	Requesting publication of SIR after		
	Iditional fee(s) during the p indicated below, except fo		ו					Examiner action		
	tified deposit account.	the ming lee		1251	110	2251	55	Extension for reply within first month		
	FEE CALCULATION	ON .		1252	420	2252	210	Extension for reply within second month		
1. BASIC FIL	ING FEE			1253	950	2253	475	Extension for reply within third month		
	Small Entity			1254	1,480	2254	740	Extension for reply within fourth month		
	Fee Fee <u>Fee Descri</u> Code (\$)	ption Fee Paid		1255	2,010	2255	1,005	Extension for reply within fifth month	<u> </u>	
	2001 385 Utility filing		٦	1401	330	2401	165	Notice of Appeal		
	2002 170 Design filin	111	┪┈	1402	330	2402	165	Filing a brief in support of an appeal		
	2003 265 Plant filing		┨	1403	290	2403	145	Request for oral hearing		
1004 770	2004 385 Reissue fili	ng fee	_	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1005 160	2005 80 Provisional	filling fee	┙	1452	110	2452	55	Petition to revive – unavoidable	$\vdash$	
SUBTOTAL (1) (\$) 770				1453	1,330	2453	665	Petition to revive – unintentional		
	30B101AL(1)	(4) 770	٦	1501	1,330	2501	665	Utility issue fee (or reissue)		
2. EXTRA CLAIN	1 FEES			1502	480	2502	240	Design issue fee	<del>                                     </del>	
	Extra	Fee from Fee		1503	640	2503	320	Plant issue fee		
Total Claims 8	-20 ** = 0	x 18 = 0	٦	1460	130	1460	130	Petitions to the Commissioner		
Independent			╡	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q	, <del>                                    </del>	
Claims 1	-3 ** = 0	X 86 = 0		1806	180·	1806	180	Submission of Information Disclosure		
Multiple Dependent		X = 0		8021		0004	40	Recording each patent assignment		
Large Entity	Small Entity				40	8021	40	per property (times number of properties)		
Fee Fee Code (\$)	Fee Fee Code (\$)	scription		1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	n	
1202 18	2202 9 Claims	in excess of 20		1810	770	2810	385	For each additional invention to be		
1201 86	2201 43 Indepe	ndent claims in excess of 3						examined (37 CFR § 1.129(b))		
1203 290		e dependent claim, if not pai		1801	770	2801	385	Request for Continued Examination (RCE		
1204 86		sue independent claims ove	r	1802	900	1802		Request for expedited examination		
original patent				1002	900 I	1002	900	of a design application		
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent					Other fee (specify)					
CURTOTAL (A)					io (specii	·y/	•			
SUBTOTAL (2) (S) 0				•	and been Do	ala Filis	- Fa- D	SUPTOTAL (S)		
				Heduc	ed by Ba	asic Filing	ree Pa	aid SUBTOTAL (3) (\$) 0		
**or number previously paid, if greater; For Reissues, see above										

SUBMITTED BY				C	omplete (il applicable)	
Name (Print/Type)	Michael D. Wiggins	Registration No. Attorney/Agent)	34,754	Telephone	248-641-1600	
Signature	Membel DW	man		Date	January 27, 2004	